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MAY 16 2007

PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/892,351
Filing Date	6.28.01
First Named Inventor	MARK DAWSON
Art Unit	2623
Examiner Name	AHMED SAMIR ANWAR
Attorney Docket Number	see

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	M. DAWSON		
Date	11 May 07	Reg. No.	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name		Date	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (05-07)

Approved for use through 05/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Small Entity Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

<i>Complete if Known</i>	
Application Number	09/892,351
Filing Date	6.28.01
First Named Inventor	MARK DAWSON
Examiner Name	AHMED Samir ANWAR
Art Unit	2623
Attorney Docket No.	self

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

<u>Small Entity</u>
Fee (\$)

50	25
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Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims

$$\frac{\text{Total Claims}}{23} - 20 \text{ (HP)} = \frac{1}{1} \times \frac{25}{25} = \text{Fee Paid ($)}$$

HP = highest number of total claims paid for, if greater than 20.

<u>Multiple Dependent Claims</u>
Fee (\$)

Indep. Claims

$$\frac{\text{Indep. Claims}}{1} - 3 \text{ or HP} = \frac{0}{0} \times \frac{25}{25} = \text{Fee Paid ($)}$$

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

$$\frac{\text{Total Sheets}}{100} - 100 = \frac{\text{Extra Sheets}}{50} / 50 = \frac{\text{Number of each additional 50 or fraction thereof}}{(round up to a whole number)} \times \text{Fee ($)} = \text{Fee Paid ($)}$$

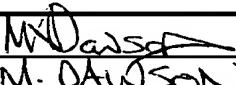
4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Fees Paid (\$)
\$25.

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	self.	Telephone
Name (Print/Type)	M. DAWSON			Date 11 May 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Patent application 09/892,351

Mark Dawson
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Ph/fx 0064 7 871 8403
11 May 2007

To Examiner, Ahmed Anwar,

Thank you for the office action of 3 April 07.

Enclosed are amended claims: 53, 55, 56, 57, 64, 67, and new claim 86.

The claim listing is as follows.

Claims 1-52 (cancelled)

Claim 53 (currently amended)

Claim 54 (previously presented)

Claims 55-57 (currently amended)

Claims 58-63 (previously presented)

Claim 64 (currently amended)

Claims 65-66 (previously presented)

Claim 67 (currently amended)

Claims 68-85 (previously presented)

Claim 86 (new)

I will respond referring to your numbering.

1.

Claiming claim 67 as independent is an option for a patent of continuation.

2-3.

Luminosity compression may be applied to varying degrees.

The degree of application is elected as is disclosed in the application.

See (0130) Luminosity compression...that reduces both brightness and contrast...A reduction by 20% is required. A reduction by 50%...is generally optimal...

(0131) Luminosity compression...via control of RGB levels output... On a scale of 0-255...a reduction...from 255 to 210 is required. A reduction down to 160 is generally optimal.

Claims 55 and 57 have been amended to remove the term 'nth degree'

4-7.

Claim 53 has been amended to omit 'the process of' and 'may be' and to distinctly claim subject matter. New dependent claim 86 now claims the feature.

"from within color channel allocations effected below" refers to the color channel allocations of the next step in the claim.

See specification as filed, (0138) (0139) page 42.

"Color washing...the image to be viewed through red gel (allocating)...contrasts within a...red channel"

Claim 58 claims 'images' that are produced as claimed in claim 1.